

COUNTY OF SAN BERNARDINO STANDARD PRACTICE

NO. 3-2.40

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ISSUE 9/99

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BEHAVIORAL HEALTH

DEPARTMENT

TIME AND LABOR REPORT (TLR) FORM – HOW TO COMPLETE Rudy Lopez, Director

I. PURPOSE

To acquaint Department staff with the procedures for completing Time and Labor Report (TLR) forms.

II. POLICY

In order to maintain consistent and accurate cost allocations, it is critical that the time designated to organization and project codes on the TLR's reflects the time reported to SIMON through the CDI's for the same time periods. The information in this procedure insures uniformity and consistency in coding TLR's.

III. TLR PROCEDURE

A. TIME TYPES

The most frequently used Unit Type Codes are printed on the TLR.

B. COMPLETING THE TLR's

The County TLR (See Attachment 1) is filled out and turned in every two weeks, at the time appointed by your clinic or division. It must be completed accurately and legibly in pencil and given to your supervisor. Since it is submitted to Payroll in the middle of the second week of the pay period, adjustments to Organizational and Project Codes may be necessary due to schedule changes, unanticipated illness, etc. Procedures for correcting TLR's within the same pay period are detailed in Section VI of this SPM.

The first few Time and Labor Report forms will not contain pre-printed employee information. It is necessary for the employee to complete name, company, union code, pay group, job code, position number, employee ID and pay period at the top of the form. Once you are established in the payroll system, this information will appear on the form.

Attachment 1 is a sample Time and Labor Report form with explanations of unit types, numbers of units, "org" codes and project information.

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IV. ORGANIZATIONAL CODE

The column on the TLR titled Cost Center is used to record the four digit code for the site at which the work took place. The Cost center is preprinted on the TLR. If your work in the pay period is conducted in the same pay center as preprinted on the TLR, leave the cost center column blank. If your work in the pay period is conducted in a different pay center, please write the appropriate pay center in the cost center column to override the preprinted pay center. A complete list of organizational codes follows.

A. BEHAVIORAL HEALTH ORGANIZATION CODES – Descriptive Alpha Order

- 2310 ACSP Administration
 2372 ACSP "D" Street CCC
 2373 ACSP Foothill CCC
- 2350 ACSP Homeless Clinic
- 2355 ACSP Institute for Mental Disease (IMD)
- 2351 ACSP Project P.I.S.C.E.S.
- 2376 ACSP Referral & Placement
- 2356 ACSP Teamhouse
- 2100 Admin Services Division
- 2238 AES
- 2202 Agewise
- 2009 Aid to other counties
- 2212 Arrow Counseling C.V.
- 2226 Authorization Review Unit
- 2371 Barstow Clinic
- 2151 Business Office
- 2236 Casa Ramona
- 2346 CATS Baseline
- 2210 Central Valley Region (Admin.)
- 2209 Challenge Grant
- 2246 Chino Dual-Diagnosis
- 2352 CID/Discovery
- 2204 Clozaril Clinic
- 2222 Community Outreach Services
- 2160 Computer Services
- 2239 Conrep
- 2301 Conservatorship Investigation
- 2110 Contracts Management
- 2212 C.V. Arrow Counseling
- 2216 C.V. Mesa Counseling
- 2213 C.V. Nueva Vida
- 2211 C.V. Project SUCCESS

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- 2215 C.V. Rancho Cucamonga Counseling
- 2214 C.V. Ujima
- 2372 "D" Street CCC ACSP
- 2203 Deputy Director, Centralized Treatment Services Division
- 2200 Deputy Director, Community Treatment Services Division
- 2220 Desert/Mountain Region
- 2201 Direct Tx Medical Services
- 2221 Direct Tx Support
- 2000 Director
- 2152 Financial Evaluation
- 2130 Fiscal Services
- 2373 Foothill CCC ACSP
- 2357 Four Seasons Project
- 2350 Homeless Clinic ACSP
- 2227 Inpatient Managed Care FFS Case Mgmnt.
- 2355 Institute for Mental Disease (IMD) ACSP
- 2120 Internal Audits
- 2234 Jail Services
- 2349 Juvenile Justice Outpatient Program (JJOP)
- 2245 Mariposa West Valley
- 2224 Medical Records
- 2001 Mental Health Commission
- 2244 Mountain View West Valley
- 2216 New Day, Rialto C.V.
- 2213 Nueva Vida C.V.
- 2002 Patient's Rights
- 2133 Payroll
- 2231 Phoenix Services (Bldg #2 & #4 OPD)
- 2154 Property Management
- 2351 Project P.I.S.C.E.S. ACSP
- 2211 Project SUCCESS C.V.
- 2215 Rancho Cucamonga Counseling C.V.
- 2376 Referral and Placement ACSP
- 2003 Research/Evaluation
- 2356 Teamhouse ACSP
- 2214 Ujima C.V.
- 2223 Utilization Review
- 2247 Victor Valley Clinic
- 2245 West Valley Mariposa
- 2244 West Valley Mountain View

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B. OFFICE OF ALCOHOL AND DRUG PROGRAMS ORGANIZATIONAL CODES – Descriptive Alpha Order

- 2422 AIDS/HIV
- 2415 Alcohol Awareness
- 2446 Chino Multi-Diagnosis
- 2404 Chino Perinatal
- 2413 DUI
- 2408 Family Preservation
- 2406 Fontana Perinatal
- 2401 Medi-Cal Administration
- 2400 OADP Administration
- 2414 PC 1000
- 2402 Perinatal Administration
- 2403 Perinatal Outreach
- 2416 Red Ribbon
- 2412 San Bernardino Treatment
- 2447 Victorville Multi-Diagnosis
- 2405 Victorville Perinatal

V. PROJECT DISTRIBUTION (PROGRAM)

A. BEHAVIORAL HEALTH CODINGS - In Descriptive Alpha Order

- Administrative Support Includes paperwork and phone contact not reported under another code; administrative staff meetings; individual supervision of staff and volunteers; orientation of new staff; regional internal audits; discipline meetings; furlough time; court appearances not reported under another of these codes; clinical supervision of interns and occupational therapy (OT); purchase order shopping; and all time and activities which do not fall into other categories.
- 1009 <u>Billable Mental Health Services</u> All Medi-Cal defined "Mental Health Services," "Case Management," "Medication Support Services" and "Crisis Management Services" including meds support, individual and group therapy, crisis intervention/CSU, mental health services and case management; and time reported on CDI's including time lost for no shows and cancellations unless time was otherwise utilized.
- 1017 <u>Clinical Records Committee</u> Department committee members. Also includes quality assurance activities assigned by this committee.

1006 <u>Community Services/Outreach (Nonbillable):</u>

<u>Community Client Contacts</u> - Nonbillable services to clients including services rendered that are nonbillable due to location or service type and services to non clients; nonbillable information/referral and agency consultation not connected to clients.

<u>Mental Health Promotion</u> - Nonbillable STEP classes, public speaking, media contacts, and networking.

- 1022 <u>Conservatorship Investigations</u> All time and activities related to the LPS conservatorship process. This includes time spent on needs assessment, conservatorship investigations, initial and re-establishment and all activities directly related to investigations.
- 1004 <u>Contract Administration</u> All activities preparing contracts, monitoring and evaluating compliance.
- 1040 <u>Crossroads</u> All administrative time spent on planning, managing and monitoring the Project Crossroads Grant.
- 1041 <u>Crossroads Billable Services</u> This code is to be used when providing billable services to residents of the Project Crossroads Grant Project.
- 1008 Day Rehabilitation Day treatment program time.
- 1038 <u>Laurelbrook Estates</u> All administrative time spent on planning, managing and monitoring the Laurelbrook Estates Grant.
- 1039 <u>Laurelbrook Estates Billable Services</u> This code is to be used when providing billable services to residents of the Laurelbrook Estates Grant Project.
- 1005 MAA Activities All Medi-Cal administrative activities such as identifying and recruiting mental health service contract providers; developing and negotiating mental health service contracts; monitoring and paying mental health service contract providers; and providing technical assistance to mental health service contractors. See specific list for acceptable MAA activities.
- 1037 <u>Managed Care</u> All administrative time spent on planning, implementing and monitoring managed care. This code is not to be used if another billable code applies.

- 1016 <u>Medication Monitoring Committee</u> Department committee members. Also includes Medi-Cal medication chart monitoring and quality assurance activities assigned by this committee.
- 1020 Physician Travel Time Used by doctors only, site to site.
- 1021 <u>Probable Cause Hearings</u> Not billed to patients. Hearings on the Inpatient Unit.
- 1013 <u>Quality Assurance</u> General quality assurance activities, including Clinic Supervisor case review of Medi-Cal clients only.
- 1014 <u>Quality Improvement Working Committee</u> Department committee members. Also includes quality assurance activities assigned by this committee.
- 1015 <u>Quality Management Committee</u> Department committee members. Also includes quality assurance activities assigned by this committee.
- 1002 Research/Evaluation Reserved for Research and Evaluation Staff.
- 1003 <u>Training</u> Organized group training provided to staff requiring the submission of an EAP; or Department sponsored clinic approved training not requiring an EAP.
- 1018 <u>UR/Inpatient Continuous Quality Improvement (CQI) Committee</u> Department committee members. Also includes quality assurance activities assigned by this committee.
- 1019 <u>Utilization Review Committee</u> Department committee members. Also included quality assurance activities assigned by this committee.
- 1026 <u>Vocational Rehabilitation</u> Certified time match or case service time for the Cooperative Agreement, Project PISCES and Project SUCCESS with the State Department of Vocational Rehabilitation. See SPM on Vocational Program Time and Attendance and Charge Date Invoice (CDI) reporting.
- 1007 <u>24-Hour Care</u> Reserved for Adult and Child Inpatient, or other staff working shifts to cover these units.
- B. OADP CODINGS In Descriptive Alpha Order
 - 9128 Administrative Staff Productive Time This code is for OADP administrative staff only. It includes those administrative, management and support functions not specifically defined by other codes. Note, OADP administrative staff will only use code 9101, administrative support, to record time when they are not available to perform their assigned duties, e.g. vacation, sick, staff meetings.

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- 9101 Administrative Support All time not entered into SIMON through CDI's or any leave time off.
- 9138 <u>Laurelbrook Estates</u> All administrative time spent on planning, managing and monitoring the Laurelbrook Estates Grant.

VI. CORRECTION OF TLR WITHIN THE SAME PAY PERIOD

An amended TLR will be used for adjusting the TLR, for leave time only. The amended TLR should be completed and faxed to Gilbert Street Payroll at (909) 387-7243 by 4:00 p.m. Friday. Payroll personnel will see that the system is adjusted to accurately reflect the leave time taken. Adjustments to clinical time can be made in the next pay period.

In the employee's absence, the Clinic Supervisor will submit the amended TLR based on agreed upon leave categories.

VII. PHYSICIANS/CONTRACT EMPLOYEES AND CONTRACT PHYSICIANS/ PUBLIC SERVICE EMPLOYEES (INCLUDING INTERNS)

A. REGULAR COUNTY EMPLOYEE PHYSICIANS

The vacation, holiday and sick leave time, within accumulated limits, should be charged to the cost centers where the physician regularly works in a proportional basis to time worked at each cost center. A temporary assignment should not change this method of allocation unless SMA problems require costs to be proportioned to the temporarily assigned cost centers.

B. CONTRACT PHYSICIANS AND OTHER CONTRACT EMPLOYEES

Only time worked goes on the TLR and any paid holidays agreed to in each negotiated agreement. The physicians within this category of employees do not accumulate sick leave, vacation or holiday time. They may take time off from their regular duties, but at the end of the year, they should have worked their agreed upon hours. This time off is not paid for by the Department.

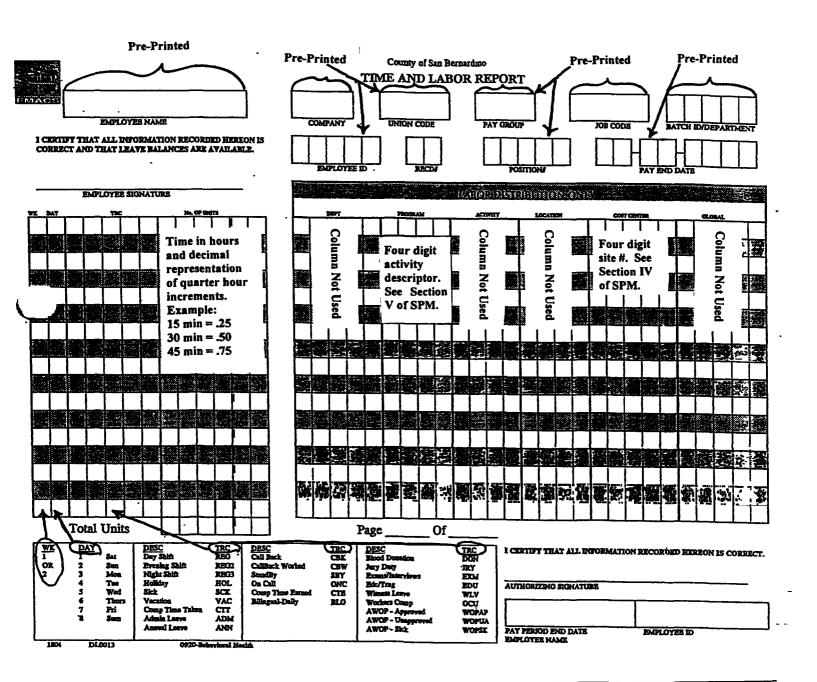
NOTE: When a physician receives vacation or holiday time as a negotiated benefit from their contract, this vacation time should be treated as if the physician was a regular county employee (As in A. above).

C. PUBLIC SERVICE EMPLOYEES (INCLUDING INTERNS)

Only time worked goes on the TLR. Employees in this category do not accrue sick leave, vacation or holiday time. Time off is not paid by the County.

SAMPLE TIME AND LABOR REPORT (TLR) FORM

The County TLR is filled out and turned in every two weeks, at the time appointed by your division. It must be filled out carefully in pencil and given to your immediate supervisor. Numbers must be written legibly. Since the TLR is completed the middle of the second week of each pay period, you will be recording some hours for the second week before you actually work them. If you need to make a change to hours reported because of unexpected schedule changes, unanticipated sick leave or other leave, follow the procedures in Section VI of this SPM.



The columns used to designate organization and project codes should reflect the time reported to SIMON through the CDI's for the same period. Properly coding the cost center and program codes will insure uniformity and consistency and allows the Department to maximize Medi-Cal dollars. The column for "Cost Center" is used to record the four-digit code for the site at which the work took place. If you do some work at various sites, you must code those time totals to the different sites. The next four-digit column is for the activities you performed. Please see Section V for descriptions of Program Codes. All non-work time (non – REG) is coded to Program Code 1001.